| Image# 12940408197 | | | | | PAGE 1 / 6 |
|---|---|--------------------------------------|---------------------|---|-------------------------------------|
| FEC AN | PORT OF I D DISBUR Other Than An Auth | SEMENT | s | | Office Use Only |
| 1. NAME OF TYP COMMITTEE (in full) | e or print V | Example: If typin over the lines. | ng, type | 12FE4M5 | |
| Advocates for New Hamps | shire Patients | | | | |
| | | | | | |
| ADDRESS (number and street) | Sarah Circle | | | | |
| Check if different | | | | | |
| than previously La reported. (ACC) | aconia | | | | 03246 |
| 2. FEC IDENTIFICATION NUMB | ER V CITY | ∕▲ | S | | ZIP CODE |
| C C00515973 | 3. IS RE | | NEW N) OR | AME (A) | ENDED |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 | Report Due On: Mar 2 | 20 (M3) | | Sep 2 Oct 2 | |
| Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) | (d) 30-Day POST-Election | on 11 / | 06 / Y | 2012 Runoff (30 | in the State of R) Special (30S) |
| Termination Report (TER) | Report for the: Election | on / | D D / Y | Y Y Y Y | in the State of |
| 5. Covering Period 10 | 01 / Y Y Y 01 2012 | through | M M 10 | / D D / 17 | 2012 |
| I certify that I have examined this Re Type or Print Name of Treasurer H | port and to the best of r enry D Lipman | ny knowledge and | belief it is true | , correct and | complete. |
| Signature of Treasurer | pman | [Electronicall | y Filed] Da | ite 10 | / D D / Y Y Y Y 24 2012 |
| NOTE: Submission of false, erroneous, | or incomplete information | may subject the per | son sianina this | s Report to the | penalties of 2 U.S.C. \$437a |
| Office Use Only | | | | , | FEC FORM 3X Rev. 12/2004 |

10/24/2012 13 : 00

the Committee (Itemize all on

Schedule C and/or Schedule D)

| Pag | e | 2 |
|------|---|---|
| I au | | - |

| | – FEC Form 3X (Rev. 02/2003) | SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS | - Page 2 |
|-----|--|--|-----------------------------------|
| W | Vrite or Type Committee Name | | |
| A | Advocates for New Hampshire Patie | ents | |
| R | Report Covering the Period: From: 10 | | To: |
| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| 6. | (a) Cash on Hand January 1, 2012 | | 0.00 |
| | (b) Cash on Hand at Beginning of Reporting Period | 23390.70 | |
| | (c) Total Receipts (from Line 19) | 250.00 | 42925.00 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 23640.70 | 42925.00 |
| 7. | Total Disbursements (from Line 31) | 0.00 | 19284.30 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 23640.70 | 23640.70 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY | | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

| Image# | 12940408199 |
|--------|-------------|
|--------|-------------|

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Advocates for New Hampshire Patients

| Report Covering the Period: From: | / D / Y | b: 10 / 17 / 2012 |
|---|---|-----------------------------------|
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 250.00 | 39775.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 0.00 | 3150.00 |
| (iii) TOTAL (add | , | 7 7 |
| Lines 11(a)(i) and (ii) | 250.00 | 42925.00 |
| | | |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | | |
| (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii), (b), and (c)) (Carry | | |
| Totals to Line 33, page 5) | 250.00 | 42925.00 |
| 2. Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | 0.00 |
| | 0.00 | |
| 3. All Loans Received | | 0.00 |
| | 0.00 | |
| 4. Loan Repayments Received | 0.00 | 0.00 |
| 5. Offsets To Operating Expenditures | | |
| (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| (Carry Totals to Line 37, page 5) | | 7 7 7 |
| to Federal Candidates and Other | | |
| Political Committees | 0.00 | 0.00 |
| 7. Other Federal Receipts | | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 3. Transfers from Non-Federal and Levin Funds | 7 7 7 | |
| (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| Ϋ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ | | |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | 7 7 7 | 7 7 |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| | | |
| 9. Total Receipts (add Lines 11(d), | | |
| 12, 13, 14, 15, 16, 17, and 18(c))► | 250.00 | 42925.00 |
| - | | |
| 0. Total Federal Receipts | | |
| (subtract Line 18(c) from Line 19)► | 250.00 | 42925.0 |

DETAILED SUMMARY PAGE

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 284.30 |
| (c) Total Operating Expenditures | 7 7 | 7 7 |
| (add 21(a)(i), (a)(ii), and (b))► | 0.00 | 284.30 |
| Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| Contributions to Federal Candidates/Committees and Other Political Committees | 0.00 | 19000.00 |
| Independent Expenditures | | |
| (use Schedule E) Coordinated Party Expenditures | 0.00 | 0.00 |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 |
| Loan Repayments Made | 0.00 | 0.00 |
| Loans Made | 0.00 | 0.00 |
| Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| | | 0.00 |
| (b) Political Party Committees(c) Other Political Committees | 0.00 | |
| (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds | 0.00 | 0.00 |
| (add Lines 28(a), (b), and (c))► | | 0.00 |
| Other Disbursements | 0.00 | 0.00 |
| Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity | | |
| (from Schedule H6) (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely | | |
| With Federal Funds(c) Total Federal Election Activity (add | <u> </u> | 0.00 |
| Lines 30(a)(i), 30(a)(ii) and 30(b))► | 0.00 | 0.00 |
| Total Disbursements (add Lines 21(c), 22, | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 0.00 | 19284.30 |
| Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 0.00 | 19284.30 |

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DETAILED SUMMARY PAGE

of Disbursements

| II. Net Contributions/Operating Ex- penditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| . Total Contributions (other than loans) (from Line 11(d), page 3) | 250.00 | 42925.00 |
| . Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| . Net Contributions (other than loans) (subtract Line 34 from Line 33) | 250.00 | 42925.00 |
| . Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))► | 0.00 | 284.30 |
| Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 284.30 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

6

| ITEMIZED RECEIPTS | for each category Detailed Summary | |
|--|---|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the | atements may not be sold or use name and address of any politica | d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Advocates for New Hampshire F | atients | |
| Full Name (Last, First, Middle Initial) A. Peter DeVeau Mailing Address 33 Oakmont Drive City Concord FEC ID number of contributing federal political committee. Name of Employer Concord Hospital Receipt For: 2012 Primary ✓ General Other (specify) ▼ | State NH Zip Code 03301 C Occupation Administrator Aggregate Year-to-Date ▼ | Date of Receipt this Period Amount of Each Receipt this Period 250.00 250.00 |
| Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼ | State Zip Code C Occupation Aggregate Year-to-Date | Date of Receipt |
| Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼ | State Zip Code C | Date of Receipt Date of Receipt Amount of Each Receipt this Period |
| SUBTOTAL of Receipts This Page (optional) | | 250.00 |

TOTAL This Period (last page this line number only).....

250.00